



# Northeast CAPT News Update

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## VOICES FROM THE FIELD

### Understanding Gender Differences in Methamphetamine Use

Understanding gender differences in methamphetamine (meth) use can help us identify more appropriate prevention and treatment strategies. A study of 350 men and women receiving treatment for meth addiction in Los Angeles (Brecht et al., 2004) revealed the following:

- Both men and women said that they were first introduced to meth by “friends.” However, women were significantly more likely than men to be introduced to the drug by their spouses/significant others (20 percent of females versus 9 percent of males), whereas men were significantly more likely to receive meth from their friends (63 percent versus 53 percent).
- The majority of women said that meth was their primary substance of abuse and that they were also less likely than men to turn to another drug if meth was unavailable. Only 13 percent of women indicated they would use another drug versus 34 percent of men. Men were significantly more likely to steal, cook, or get meth from coworkers if they had no money to buy it; women were more likely to obtain it from spouses/significant others.

Women’s initiation and access to meth through spouses/significant others may indicate an already established and more deeply integrated structure of family and drug use. Thus, to effectively treat women, this network has to be recognized and understood. Ultimately, understanding drug networks are important for breaking patterns and preventing relapse.

Other findings from this study include the following:

- Women were significantly more likely than men to use meth to lose weight (36 percent versus 7 percent) and/or have more energy (52 percent versus 38 percent). Men were more likely to use it to work longer hours (19 percent versus 10 percent).
- Men and women reported different side effects of meth. Males participating in the study were more likely to report meth-related work problems and high blood pressure. Females were more likely to report skin problems.

A second study of men and women receiving treatment for meth use in California (Hser et al. 2005) offers additional insights in this study:

- Significantly more men than women were employed (44 percent versus 24 percent).
- Women were significantly more likely than men to be receiving public assistance (63 percent versus 37 percent).
- Women were more likely to have severe psychiatric problems, as well as a history of sexual violence and physical abuse.

As practitioners become more aware of gender differences in side effects, signs, symptoms, and patterns of use, they can better identify and treat users. These findings also have implications for targeted prevention messages for men and women.

**References:** Brecht, ML, O'Brien, A, von Mayrhauser, C, & Anglin, MD. (2004). Methamphetamine use behaviors and gender differences. *Addictive Behaviors*, 29, 89-106.

Hser, Y, Evans, E, & Huang, Y. (2005). Treatment outcomes among women and men methamphetamine abusers in California. *Journal of Substance Abuse Treatment*, 28, 77-85.

### **Where can you find more information on methamphetamine prevention campaigns?**

Several organizations across the country have developed meth prevention and education materials including television advertisements, radio spots, posters, and billboards. Most of these sites include personal stories from meth users, general information on meth, and materials for teens, young adults, parents and communities. For more information and links to media campaigns from the California Attorney General's Crime and Violence Prevention Center, Kansas Methamphetamine Prevention Project, Montana Meth Project, and Partnership for a Drug-Free America, please visit the Northeast CAPT website at:

<http://captus.samhsa.gov/northeast/resources/faqs/index.cfm>

## **RESEARCH UPDATE**

### **Post-Circuit Blues: Motivations and Consequences of Crystal Meth Use among Gay Men in Miami**

Miami, Florida was one of the first cities to see a rise in the use of club drugs —especially ecstasy, GHB, and ketamine. Today, crystal methamphetamine, a drug of abuse among gay men for some years on the West coast, has also become prevalent in Miami. This paper reports the results of focus groups with crystal users in Miami and cites loneliness, fears about physical attractiveness due to aging and illness, and desires to lose sexual inhibitions as common motivations for using the drug. Focus group participants also describe continued use of crystal as the cause of lost friendships, employment and long-term relationships, as well as sexual behaviors that put men at risk for HIV and other sexually transmitted infections.

**Reference:** Kurtz, S.P. (2005). "Post-circuit blues: motivations and consequences of crystal meth use

among gay men in Miami." *AIDS and Behavior*, 9, 63-72.

### **Drug Courts: An Effective Strategy for Communities Facing Methamphetamine**

Drug courts have been an effective tool for fighting meth addiction and trafficking by combining intensive drug rehabilitation with legal requirements to complete treatment. Drug courts provide added accountability from the court, probation, and law enforcement systems, as well as service coordination to more effectively help methamphetamine addicts recover. In general, drug courts have found the following strategies most effective in helping meth addicts:

- Intensive community supervision and monitoring
- Ongoing accountability with increased court hearings
- Longer treatment periods
- Treatment for co-occurring mental health disorders
- Implementation of evidence-based treatment

Drug courts are also helping children who are exposed to meth by providing health care, education, and child protective services. Federally funded drug courts are in California, Oregon, Hawaii, Nevada, Oklahoma, and Kentucky.

**Reference:** Bureau of Justice Assistance. (2005). *Drug Courts: An Effective Strategy for Communities Facing Methamphetamine*. Washington, D.C.: C. West Huddleston III. Available online at: <http://www.ojp.usdoj.gov/BJA/pdf/MethDrugCourts.pdf>

### **Toward An Ecstasy and Other Club Drug (EOCD) Prevention Intervention for Rave Attendees**

Recent research has identified rave attendees as being at high-risk for the use of club drugs, such as ecstasy. Yet, rave attendees are only one of several club-going populations. In this study by Yacoubian et al., researchers explore the prevalence of ecstasy and other club drug (EOCD) use among a sample of club attendees in Washington, D.C. Data was collected primarily from adult homosexual club goers. Yacoubian et al. found that besides alcohol and marijuana, drug use prevalence was low, with an estimated 5% of respondents using ecstasy. From this research as well as a meta-analysis of the literature, a community-level prevention intervention for

the population at highest risk for EOCD use, rave attendees, is discussed.

**Reference:** Yacoubian, G.S., Miller, S, Pianim, S, Kunz, M, Orrick, E, Link, T, Palacios, W.R., Peters, R.J. (2004). "Toward an ecstasy and other club drug (EOCD) prevention intervention for rave attendees." *Journal of Drug Education*, 34(1), 41-59.

### **Alcohol and Drug Use Influence Academic Performance**

Substance abuse has long been linked to physical and mental problems and can influence every facet of users' lives. Now studies show that alcohol and drug use can negatively affect a student's school performance. The National Survey on Drug Use and Health (NSDUH) reported in 2002 that teenagers who received grades of D or below were more likely than those with higher grades to have used cigarettes, alcohol, or illicit drugs. The percentages of students who admitted past month substance abuse in the study were as follows:

- 6 percent of students with an A average
- 13 percent of students with a B average
- 20 percent of students with a C average
- 36 percent of students with a D average.

In another report, NSDUH found that teenagers who enjoyed going to school, felt that their assigned schoolwork was meaningful, or who thought that what they learned in school was going to be important later in life were less likely to have used illicit drugs or alcohol compared to young people who did not have these positive attitudes towards school.

Numerous studies show that parental disapproval is a powerful force. By learning the risks of substance abuse at an early age, children will know their parents disapprove of alcohol and drug use and may be less likely to try them. Parents can also encourage youth to get involved in sports, hobbies, and clubs. Teenagers who are involved in extracurricular activities are less likely to use alcohol and drugs, possibly because they develop their own interests and don't have the spare time to experiment with drugs.

#### **For more information:**

[http://www.ncadi.samhsa.gov/newsroom/rep/2005/academics\\_alcohol.aspx](http://www.ncadi.samhsa.gov/newsroom/rep/2005/academics_alcohol.aspx)

### **Kids Who Drink Early in Life: What Does it Mean for Their Future?**

Alcohol experimentation in late childhood or early adolescence is a common event. Yet an early age of first drink (AFD) is associated with a variety of negative outcomes. A study in the October issue of *Alcoholism: Clinical & Experimental Research* looks at variables that may precede or predict AFD, with a focus on four areas: child characteristics, family demographics, family psychopathology, and child behavior problems. Surprisingly, aspects of the child and the child's environment seemed to affect their AFD more than family history of alcohol dependence.

#### **For more information:**

<http://www.brightsurf.com/news/headlines/view.article.php?ArticleID=21394>

## **NEW RESOURCES**

### **Alcohol Screening and Brief Intervention Curriculum**

This curriculum offers a practical approach to screening and brief intervention for alcohol problems in medical settings with attention to cross-cultural efficacy and health disparities.

#### **About the curriculum:**

Helping Patients with Alcohol Problems is a new, freely available web-based training curriculum geared toward generalist clinicians. This evidence-based curriculum is a tool used for teaching skills for addressing alcohol problems (e.g. screening, assessment, brief intervention, and referral) in primary care settings, and emphasizes knowledge and skills regarding cross-cultural efficacy.

It has been designed to be taught in 45 minute sessions or expanded into longer or multiple sessions. It consists of a power point slide presentation, complete with trainer notes, and three case-based videos demonstrating skills for addressing alcohol problems in primary care settings. The curriculum has been piloted with target audiences (practicing primary care physicians and physicians in training).

### Using the curriculum:

The curriculum slides and videos can be freely downloaded from this website, or used online. Narrative for the slides is included as a guide for teachers. Expert faculty are available by appointment for live Q&A sessions.

### For more information:

<http://www.projectmainstream.net/projectmainstream.asp?cid=875>

## SELECTED UPCOMING EVENTS

### Upcoming National Conferences

*CADCA's Forum XVI: Coalitions from Passion to Power*

February 14-16, 2006 in Washington, D.C.

Forum XVI offers workshops in topic areas including evaluation, building and strengthening partnerships, latest trends in the prevention field, sustainability and issues facing the youth of America such as underage drinking, drinking on college campuses and how to involve youth in your coalition.

In addition, the Coalition Leader Roundtables offer the opportunity to share ideas with your colleagues and find out what other people are doing to combat the challenges you may face.

For more information and to register for the event:  
<http://cadca.org/events/forum/forum16/default.asp>

## NECAPT Key Contacts

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